Application for

Permit Amendment

Part 1 of 5 - Minimum Requirements Checklist



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266

(503) 986-0900 www.oregon.gov/OWRD

This permit amendment application will be returned if Parts 1 through 5 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

		Tot duestions, blease can (303) 300 0300, and ask for transfer section.	REC	FIV	ED.						
	Check	all items included with this application. (N/A = Not Applicable)		A -	7024						
X.		Part 1 – Completed Minimum Requirements Checklist.	JAN	4	Cocy						
X. X X		Part 2 – Completed Application Map Checklist.	OV	۷RI	D						
X		Part 3 – Application Fee, payable by check to the Oregon Water Resources completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd fee calculator.	; Departr	nent	, and						
X		Part 4 – Completed Applicant Information and Signature.									
Z)		Part 5 – Information about Permits to be Amended: Number of permits to List the Permits here:		ndec	1: <u> </u>						
Z		Completed Permit Amendment Application Map (Does not have to be pre Water Right Examiner).		a Ce	ertified						
	N/A N/A	Request for Assignment Form and statutory fee. The request for assignment completed if the applicant is not the permit holder of record and needs to permit; or the landowner of the proposed place of use is not the permit holder of use is not the permit holder of the permit (the Request for Assignment Form is an https://www.oregon.gov/OWRD/Forms/Pages/default.aspx). Assignment applicant is the permit holder of record.	be assig older of a vailable o	ned trecor	to the rd and e at						
	₩ N/A	Affidavit(s) of Consent are required from all permit holder(s) of record if to the applicant or other permit holders of record that are not listed as ap		t is n	ot assigned						
	⊠ N/A	Oregon Water Resources Department's Land Use Information Form with a (or signed land use form receipt stub) from each local land use authority in diverted, conveyed, and/or used. Not required if water is to be diverted, conly on federal lands or if all of the following apply: a) a change in place of structural changes, c) the use of water is for irrigation only, and d) the use irrigation district or an exclusive farm use zone.	n which v conveyed f use only	water , and y, b)	r is to be I/or used no						
	N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well point(s) of appropriation.	(s)) or ad	ditio	nal						
	⊠ N/A	Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500 feet from the surface water source and more than 1000 feet upstream or downstream from the point of diversion. (ORS 540.531(2) or (3)).									
		(For Staff Use Only)	_	- !-	by OWRE						
		WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): Application fee not enclosed/insufficient Map not included or incomplete Land Use Form not enclosed or incomplete	Re ete		ved by OWRD AN $3\ 0\ $ 2024						
		Additional signature(s) required Part is incomplete Other/Explanation Staff: 503 Date: /		-S	alem, OR						

		below are not met.
	Please	the sure that the map you submit includes all the items listed below and meets the sements of OAR 690-380-3100, however, the map does not have to be prepared by salem, OR Certified Water Right Examiner. Check all boxes that apply.
	N/A	If more than three permits are involved, separate maps for each permit. JAN 4 7024
X		Permanent quality printed with dark ink on good quality paper.
X		The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, 11×17 inches, or up to 30×30 inches. For 30×30 inch maps, one extra copy is required.
\geq		A north arrow, a legend, and scale.
\boxtimes		The scale of the map must be: 1 inch = 400 feet, 1 inch = $1,320$ feet, the scale of the county assessor map if the scale is not smaller than 1 inch = $1,320$ feet, or a scale that has been preapproved by the Department.
X		Township, Range, Section, $\frac{1}{4}$, DLC, Government Lot, and other recognized public land survey lines.
X		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
		Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
X		Existing place of use that includes separate hachuring for each water use permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged.
	MN/A N/A	If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
Ø		Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water use permit.
X	□ N/A	If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example $-42^{\circ}32'15.5''$) or degrees-decimal with five or more digits after the decimal (example -42.53764°).

Your permit amendment application will be returned if any of the map requirements listed by OW

	FEE WORKSHEET for PERMIT AMENDMENT		
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	.1	\$1,360
_	Types of change proposed: Received by OWRDJAN 4 700	4	
	☐ Place of Use ☐ Point of Diversion/Appropriation ☐ JAN 3 0 2024 ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐		2
	Number of above boxes checked = (2a)		
	Subtract 1 from the number in line 2a = (2b) If only and Change of his will be 0		
2	Multiply line 2b by \$1090 and enter » » » » » » » » » » » » » » » » » » »	2	0
	Number of permits included in Permit Amendment (3a)		
	Subtract 1 from the number in 3a: O (3b) If only one permit this will be 0	1	0
3	Multiply line 3b by \$610 and enter » » » » » » » » » » » » » » » » » » »	3	
	Do you propose to add or change a well, or change from a surface water POD to a well?		
	\square No: enter 0 \bowtie Yes: enter \$480 for the 1 st well to be added or changed $\boxed{480}$ (4a)		
	Do you propose to add or change additional wells?		
	□ No: enter 0 ☐ Yes: multiply the number of additional wells by \$410 ☐ (4b)	4	890
4	Add line 4a to line 4b and enter » » » » » » » » » » » » » » » » » » »	4	
	No: enter 0 on line 5		
	Yes: enter the cfs for the portions of the permits to be amended (see below*):(5a)		
	Subtract 1.0 from the number in 5a above:(5b)		
	If 5b is 0, enter 0 on line 5 » » » » » » » » » » » » » » » »		
	If 5b is greater than 0, round up to the nearest whole number:(5c) and multiply 5c		
5	by \$350, then enter on line 5 » » » » » » » » » » » » » » » » » »	5	225
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal: Is this permit amendment:	6	2,250
	necessary to complete a project funded by the Oregon Watershed Enhancement Board		
	(OWEB) under ORS 541.932?		
	endorsed in writing by ODFW as a change that will result in a net benefit to fish and		
	wildlife habitat?		
_	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7	-	0
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » » » »	7	7 750
8	Subtract line 7 from line 6 » » » » » » » » » » » » » Permit Amendment Fee:	8	6,650

- *Example for Line 5a calculation to transfer 45.0 acres of Primary Permit S-12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Permit S-87654 (1/80 cfs per acre) on the same land:
- 1. For irrigation calculate cfs for each permit involved as follows:
 - a. Divide total authorized cfs by total acres in the permit (for S-12345, 1.25 cfs \div 100 ac); then multiply by the number of acres to be changed to get the application cfs (x 45 ac= 0.56 cfs).
 - b. If the water right permit does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For S-87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs)
- 2. Add cfs for the portions of permits on all the land included in the application; however **do not count** cfs for supplemental permits on acreage for which you have already calculated the cfs fee for the primary permit on the same land. The fee should be assessed only once for each "on the ground" acre included in the application. (In this example, blank 5a would be only 0.56 cfs, since both permits serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

Part 4 of 5 – Applicant Information and Signature

Applicant Information				
APPLICANT/BUSINESS NAME Burkholder Pr	operties	LLC	PHONE NO. 541-974-018	ADDITIONAL CONTACT NO.
ADDRESS 5046 Grand F	raine R	id. SE		FAX NO.
Albany	STATE ZI	97322	E-MAIL burkhold	erforms le Ognail. co
BY PROVIDING AN E-MAIL ADDRES	•		E ALL CORRESPONDENCE F	
ELECTRONICALLY. COPIES OF THE F				
Agent Information — The ager AGENT/BUSINESS NAME	nt is authorize	ed to represent	PHONE NO.	ADDITIONAL CONTACT NO.
AGENT/ BOSINESS NAIVIE			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
CITY	STATE ZI	P	E-MAIL	
BY PROVIDING AN E-MAIL ADDRES ELECTRONICALLY. COPIES OF THE F				ROM THE DEPARTMENT
Explain in your own words wh	at you propo	se to accompli	sh with this permit am	endment; and why:
,	oched			
If you need additional space, conf				
Check this box if this projec stimulus dollars)	t is fully or pa	rtially funded b		OWDD
Is the applicant the permit hold	der of record	Yes 🗌 N	Received b	JAN 4
If NO, include either:		/	JAN 3 (2024 OWDD
A completed assignment to the applicant(s), OR	t form (with r	equired statuto	ry assignmen s (a.s. si	gring all or a portion of the perm
	rom the perm	nit holder(s) of r	ecord that gives permis	sion for the applicant to amend t
Has the Completion ("C") Date	of the permit	t(s) in this appli	cation expired? Yes	s ⊠ No
If YES, this application will not			Λ	
If NO, what are the completio			Aug. 14,20	
			7.7	n is pending, the Department will plication is approved for the pern
				processing of this Permit Amend
Application if the completi	on date of th	e permit expire	s within 6 months of the	e date of filing this application.
By my signature below, I confir	m that I unde	erstand:		
 Prior to Department appro 	val of the per		it, I may be required to	submit payment to the Departme
for publication of a notice per week for two consecut	ive weeks. If	more than one	qualifying newspaper is	where the permit is located, once available, I suggest publishing the
for publication of a notice per week for two consecut notice in the following new	vspaper:	more than one Loony Dem	qualifying newspaper is wourat Herald	available, I suggest publishing the
for publication of a notice per week for two consecut	vspaper:	more than one Loony Dem	qualifying newspaper is wourat Herald	available, I suggest publishing the
for publication of a notice per week for two consecut notice in the following new	vspaper:	more than one loony Dew ed in this appli Kent	qualifying newspaper is wourat Herald	available, I suggest publishing the

Check one of the following:											
The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.											
☐ The permit holder(s) of record will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to the permit holder(s) of record.											
Check the appropriate box, if applicable:											
Check here if any of the permits proposed for amendment are or will be located within or served by an irrigation or other water district.											
IRRIGATION DISTRICT NAME ADDRESS											
CITY	STATE	ZIP									
Check here if water for any of the permits supplied under a water service agreement or other contract for stored water with a federal agency or other entity.											
ENTITY NAME	ADDRESS										
CITY	STATE	ZIP									
To meet State Land Use Consistency Requirem city, municipal corporation, or tribal government conveyed or used.											
ENTITY NAME Linn County	ADDRESS 300 SW 4th	Ave.									
Albony	STATE OR	^{ZIP} 97321									
ENTITY NAME	ADDRESS										
CITY	STATE	ZIP									
ENTITY NAME	ADDRESS	, ·									
CITY	STATE	ZIP									
Da	posived by OWRD	ECEIVED									

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Please use and attach additional	pages of Table 2 as needed
See page 6 for instructions.	

Do you have questions about how to fill-out the tables? Contact the Department at 503-986-0900 and ask for Transfer

Table 2. Description of Changes to Water Use Permit # 67-18256

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

	AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.							Proposed Changes (see	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.														
Twp	R	ng	Sec	1/4	í ¼	Tax Lot		Acres (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Changes (see "CODES" from previous page)		wp	Rn	gg	Sec	1/4	14		Gvt Lot or DLC		POD(s) or POA(s) to be used (from Table 1)	Priority Date
											EXAMP	LE											
2 5	9	E	15	NE	NW	100		15.0	POD #1 POD #2		POU/POD	2	s	9	E	15	NW	NW	100	1	10.0	POD #5	
n 11	"	"	"	**	н	"	#	EXAMPLE	n			2	S	9	E	15	SW	NW	200		5.0	POD #6	
115	3	W	22	NE	NW	00400			Well #1	Nov. 6	POA	11	S	3	W	22	NE	NW	00400			Well #1	Nov. 6 2018
11 5	3	W	21	SW	NE	00900			Dell #Z	. 1	POA	il	5	3	W	72	NN	NW	00400			Well#Z	Nov. 6 2018
	-	er e																					
		andata tha a canada da																					
		Material Section (Section (Sec																					
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Additi	onal	rem	arke		:			L	I						Re	ceiv	ed		WRD		JAN	4 202	4
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Salem, OR Part 5 of 5 – Water Use Permit Information

Please use a separate parts for each permit being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

PERMIT # 6-18256

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)

POD/POA Name or Number	Is this POD/POA Autho by the permit or is Proposed?		Log ID# (or		Twp		Rng		14 Y4		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
We11 *1	Auth			11	5	3	W	22	NE	NW		1350 ft, N and 270 ft. W from C1/4 woner, Section 22
Dell #Z	Auth			11	5	3	W	21	Siv	NE		1070 ft. N. and 40ft. E from C Y4 Corner, Section 21
Well #1	☐ Auth ☑ Prop	orized osed		11	5	3	W	22	NE	NW		1350 ft. N and 650 ft W from C 1/4 corner Section 22
Well #2	☐ Auth ☑ Prop	orized osed		١١	5	3	W	22	NW	NW		W from C 14 Corner Section 22
Will a	Poin Addi	e of Use (POU) t of Diversion (I itional Point of proposed char	Diversion (A	he e	ntire] A] S (9	dditio urface SW/G\ se per	nal Po wate W) mit?	int of	Approp to Grou	ell (POA) priation (APOA) und Water POA xt page. Use the
	_	"CODES" liste	d above to d	escri	be t	he p	ropo	sed ch	anges			
	(No	Complete all o	of Table 2 to	desc	ribe	the	porti	ion of	the pe	ermit t	o be ch	anged.
☐ Yes ☐	ermit ho	older of record										eing moved?
as a perr	nit holde							_				nd the required
Is the prop	osed pla	ace of use conti	guous to the	e aut	hori	zed _l	place	of us	e? 🗌	Yes [] No	
				•					_			orized place of use

unless the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to 496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

Permit # _ G1 - 18256

Are there other water rights certificates, water use permits or grouthe "from" or "to" lands? Yes No If YES, list the other certificate, permit, or ground water registratio	
If the permit(s) are for irrigation or supplemental irrigation use, oth land for irrigation that are subject to transfer must either change of to a water right certificate or ground water registration must be fill application or ground water registration modification application,	oncurrently or be cancelled. Any change ed separately in a water right transfer
For a change in point(s) of appropriation (well(s)) or additional point	ıt(s) of appropriation:
Well log(s) are attached for each authorized and proposed we associated with the corresponding well(s) in Table 1 above ar map. (Tip : You may search for well logs on the Department's http://apps.wrd.state.or.us/apps/gw/well log/Default.aspx)	nd on the accompanying application
AND/OR	
Describe the construction of the authorized and proposed do not have a well log. For proposed wells not yet const estimate" for each requested information element in the you consult a licensed well driller, geologist, or certified assembling the information necessary to complete Table	ructed or built, provide "a best the table. The Department recommends water right examiner to assist with

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right
Wal #1	No		est. 200'	12"		est. 19'	est. 80'	unknown of this time	Gravel and	
Dell #Z	No		est. 200'	12"		est. 19"		at this time	Gravel and	
		329								

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Salem, OR

TACS

Attachment 1

Oregon Water Resources Department

To whom it may concern, my name is Kent Burkholder and I am applying to amend the authorized points of appropriation for permit #G-18256. After many challenges, due to Covid and the ability of drillers in my area, that I wanted to work with, to drill bigger sized wells I have finally secured a driller to drill my wells.

For the authorized location of well #1, the driller was concerned that it was too close to the residential well at 35166 Fry Rd. SE, Albany. He stated that it was highly likely that the authorized location of well #1 would end up ruining the residential well and rendering it unusable. The driller thought that moving the authorized well to the newly proposed location an additional 380' to the west and further away from the residential well that they could coexist with each other without performance problems.

As for the authorized well #2, 3 phase power is approximately one mile away from the authorized well location. The second issue with that location is that Consumer's Power is the power supplier for that address but their power lines are hung on Pacific Power poles. Consumers estimated that it would be between \$140,000 and \$300,000 just to get the power to the authorized location. That price is debilitating. In order to abide by the ¼ mile setback from Periwinkle Creek (surface water source) I am proposing to move well #2 to the location stated on the map. If the proposed location is approved I will use 3 phase power from my farm on Fry Rd. to run the well. I would much prefer to use electricity, that way it would be possible to use a variable speed pump to supply water at only the rate and pressure needed, therefore saving energy. Otherwise, if the proposed move is not approved I will be drilling the well at the currently authorized location and using a diesel generator to power the pump. Although not the ideal setup, it would still work.

I appreciate your consideration,
Sincerely, Kent Burkholder 541-974-0187

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Salem, OR

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Land Use Information Form



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.oregon.gov/OWRD

NAME	Bur	khold	er f) coper	ties			PHO	NE 541-9	74-0187
MAILING	ADDRESS SOL	16 G	nrond	Provi	ties	SE		2.5		i to the
CITY	lbory			STATE	ZIP 97322 E	MAIL	chol	der farr	-sllc 6	gmail.com
A. <u>Land a</u>	nd Locati	on		10	- 2 ²⁰ ,					
transport	ed), and/o	r used or	developed	. Applicant	lots where waters for municipal udaries for the ta	ise, or irrigat	ion u	ses within irr	igation dist	
Township	Range	Section	1/4 1/4	Tax Lot #	Plan Designation (Rural Residential/			Water to be:		Proposed Land Use:
115	3W	22	NE NU	00400		X Div	erted	Conveyed	₩Used	
115	32	21	NE NW SE SW	00100		Div	verted	Conveyed	Used	
115	3W	16		02200		Div	verted	Conveyed	Úsed	
115	3~	15	SWSE	00600		Div	erted	Conveyed	Used	
ist all sou	nties and	cities who	ro water is	proposed	to be diverted, o	anusuad an	d/or	used or days	lanadı	
4	inn	_		proposed	to be diverted, t	.onveyeu, ar	u/or	used of deve	iopeu.	L. Friedrich
JOTE: A se	eparate La	nd Use Inf	formation i	orm must	be completed a	nd submitte	d for	each county	and city, as	applicable.
	otion of P			147						
	it to Use or			regon Wat ater Right Ti	er Resources De ransfer 🏿 🔼 P	•	ment o	or Ground Wat	ter Registrat	ion Modification
Limite	ed Water U	se License	Ex	change of W	/	Illocation of C				
ource of	water:	Reservo	ir/Pond	⊠ Ground	d Water	Surface Wate	r (nam	ne)		
stimated	quantity o	of water ne	eeded:	1.01	Cubic feet pe	er second	ga	llons per minu	te 🗌 a	cre-feet
ntended u	use of wate		Irrigation Municipal	1		Industrial Instream				household(s)
riefly des	cribe:						23.6	Tarke 1		
The	vells	are	to be	dnill	ed for	the in	rigi	shon o	f fiel	d crops.

Note to applicant: For new water right applications only, if the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt on the bottom of page 4 and include it with the application filed with the Oregon Water Resources Department.

See Page 4 🗲

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Land Use Information Form — Page 3 of 4 $\,$

Last Revised: 10/2023

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For Local Government Use Only

Salem, OR

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form. This deals only with the local land use plan. Do not include approval for activities such as building or grading permits.

Please check the appropriate box	below and provide the requested info	ormation	
	ed water use(s), including proposed construction		l outright or are not
	n. Cite applicable ordinance section(s):		BIUCOA
	ed water use(s), including proposed construction		
• • •	(Please attach documentation of applicable la		
	on/land-use decision and accompanying findin have not ended, check "Being Pursued."	igs are sufficier	it.) If approvais nave
	nave not enueu, theth being ruisucu.		
Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-	-Use Approval:
CONTROL GOOD P.S		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
, 4.		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued☐ Not Being Pursued
	special land use concerns or make recommend sposed use of water in the box below or on a se		Oregon Water
			. 9
1.6			
<u> </u>			* 1
Name: Aussa Bole	Title:	ring N	ranager
Signature:	Date:	Dertoy	
Governmental Entity:	DUMM Phone: S	41-96	7-3816
Receipt Ack	nowledging Request for Land Use Info	ormation	
this form while the applicant waits, you m have 30 days from the date of OWRD's Pu	ve: the applicant. For new water right applications hay complete this receipt and return it to the appublic Notice of the application to submit the complease note while OWRD can accept a signed receipt	olicant. If you sig pleted Land Use	gn the receipt, you will Information Form to
	completed Land Use Information Form is required		
Applicant Name:			
Staff Name:	Title:		
Staff Signature:	Date:	7.	Recei
Governmental Entity:	Phone:	n Ag pan	

From: STARNES Patrick K * WRD

Sent: Tuesday, January 23, 2024 8:40 AM

To: Kent Burkholder

Subject: RE: Map request for permit G-18256

Good Morning Kent,

The Department grants a map scale waiver for the proposed permit amendment application map .

Please include a printed copy of this e-mail when you submit the application.

Sincerely,

Kelly

Kelly Starnes, Transfer Program Analyst (He/Him/His) Oregon Water Resources Department 725 Summer St NE Suite A

Salem OR 97301-1271

Cell phone: 503-979-3511 Fax: 503-986-0903

E-mail: patrick.k.starnes@water.oregon.gov

Please Note: Under Oregon Law, messages to and from this e-mail address may be available to the public.

From: Kent Burkholder < burkholderfarmsllc@gmail.com>

Sent: Monday, January 22, 2024 4:19 PM

To: STARNES Patrick K * WRD <patrick.k.starnes@water.oregon.gov>

Subject: Map request for permit G-18256

You don't often get email from burkholderfarmsllc@gmail.com. Learn why this is important

Kelly, I am emailing you to see if I may obtain a map waiver for my permit amendment application. Please look at the attached map and let me know. I must have had a waiver with my initial application and did not know it because the map I used for the amendment is the exact one that water resources department accepted for the initial application or the requirements have changed. Let me know either way and I will be happy to get it fixed.

Thanks, Kent Burkholder 541-974-0187

Sent from Mail for Windows

STATE OF OREGON

LINN 62308

Page 1 of 1 WELL I.D. LABEL# L 127556

WATER SUPPLY WELL REPORT			STA	ART CARD	# 10	38166	
(as required by ORS 537.765 & OAR 690-205-0210)	3/29/	2018	ORIG	INAL LOG	#		
(1) LAND OWNER Owner Well I.D.		T					
First Name KIRK Last Name BURKHOLDER		(I) I OCATI	ON OF U	VELL Clare	l don	awintian)	
Company BURKHOLDER PROPERTIES LLC		(9) LOCAT				_	
Address 5410 THREE LAKES RD SE ALBANY OR							W E/W WN
City ALBANY State OR Zip 97322 (2) TYPE OF WORK New Well Deepening Converse		Sec 21 S	SE 1/4 (of the SW	1/4	Tax Lot <u>50</u>	01
TYPE OF WORK Selection Deepening Converse	sion	Tax Map Number Lat° Long°	er			Lot	2010
Alteration (complete 2a & 10) Abandonment(com	-1-4- 5-1	Lat	1	" or 44.59331	800	- 1	DMS or DD
(2a) PRE-ALTERATION	plete 5a)	Long	1	" or -123.059	53000		DMS or DD
Dia + From To Gauge Stl Plstc Wld Thrd		(Str	eet address of	well C	Neares	st address	
Casing:		5410 THREE L					
Material From To Amt sacks/lbs							
Seal:							
(3) DRILL METHOD		(10) STATIC	WATER	LEVEL			
Rotary Air Rotary Mud Cable Auger Cable Mud		, ,		D	ate	SWL(psi) +	SWL(ft)
Reverse Rotary Other		Existing We	ell / Pre-Alter				
		Completed '	Well	3/22/20	18		12
(4) PROPOSED USE Domestic Irrigation Community			Flowin	g Artesian?	1	Dry Hole?	
Industrial/Commericial Livestock Dewatering		WATER BEARI	NG ZONES	Denth	water	was first found	20.00
Thermal Injection Nother DR-3300				-			
		SWL Date	From	То	Est Flo	ow SWL(psi)	+ SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (Att	tach copy)	3/21/2018	20	38	25		12
Depth of Completed Well 82.00 ft.		3/22/2018	67	77	45	1	12
BORE HOLE SEAL	sacks/			- 6a a a c			
Dia From To Material From To Am	t lbs						
10 0 19 Bentonite 0 19 9	S				~		
6 19 82 Calculated 8.6	7						
		(11) WELL I	OG				
Calculated		(11) WELL I	200	Ground Eleva	ition _		
How was seal placed: Method A B C D	E		Material		100	From	То
X Other POURED DRY		Topsoil	400 117			0	2
Backfill placed from ft. to ft. Material		Clay Brown Ver	y Sticky			2	11
Filter pack from ft. to ft. Material Size		Clay Brown				11	17
Explosives used: Yes Type Amount		Clay Gray Very				17	21
		Clay Brown w/				21	25
(5a) ABANDONMENT USING UNHYDRATED BENTONITH	E	Gravels w/ Cour				25	38
Proposed Amount Actual Amount		Gravels Large w	/ Sand Brown	1		38	52
(6) CASING/LINER		Clay Gray	C1			52	54
Casing Liner Dia + From To Gauge Stl Plstc W	ld Thrd	Clay Brown w/ S				54	60
		Clay Gray Sandy Gravels Small w				60	67
		Graves w/ Cours				69	77
		Clay Gray	se Sand Diack			77	82
		City Gray				1 "	02
Shoe Inside Outside Other Location of shoe(s) 79							
Temp casing Yes Dia From + To							
7) PERFORATIONS/SCREENS Perforations Method Holte Air Perforator				100			
	_						
Screens Type Material	T-1-/	Date Started3	/21/2018	Co	mplet	ted 3/22/2018	
Perf/ Casing/ Screen Scrn/slot Slot # of Screen Liner Dia From To width length slots p	Tele/	(unbonded) Wa	ter Well Co	nstructor Cer	tificati	on	
Screen Liner Dia From To width length slots properly Casing 6 67 77 .25 1 240	oipe size						ing, alteration, or
Tell Casing 0 07 77 .25 1 240							ater supply wel
							above are true to
		the best of my k	nowledge and	d belief.		•	
		License Number	1074		Date	3/29/2018	
O) WELL TECTO M:			1974			3/29/2016	
8) WELL TESTS: Minimum testing time is 1 hour		Signed CHAI	RLES NUGE	NT (E-filed)			
Pump Bailer • Air Flowing Arte	esian						
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)		(bonded) Water	Well Consti	ructor Certifi	cation		
45 77 1		I accept respons	ibility for the	e construction	, deepe	ening, alteration	n, or abandonmen
							d above. All wor
							ater supply we
Temperature 53 °F Lab analysis Yes By		construction stan	dards. This i	report is true to	the be	st of my knowl	edge and belief.
Water quality concerns? Yes (describe below) TDS amount 151	ppm	License Number	664		Date :	3/29/2018	
From To Description Amount C	Jnits				_	4 .	0.0
			LES NUGE			143	98 -
		Contact Info (op	tional) Nuge	nt Drilling Co.			

STATE OF OREGON

LINN 62309

WELL I.D. LABEL# L START CARD # 1038201

WATER SUPPLY WELL REPORT	2/20/20		1038201
(as required by ORS 537.765 & OAR 690-205-0210)	3/29/20	18 ORIGINAL LOG #	
(1) LAND OWNER Owner Well I.D.			
First Name KIRK Last Name BURKHOLDER) LOCATION OF WELL (legal d	escription)
Company_BURKHOLDER PROPERTIES LLC	,	unty LINN Twp 11.00 S N/	_
Address 5410 THREE LAKES RD. SE ALBANY OR.		21 SE 1/4 of the SW	
City ALBANY State OR Zip 97322	Ta	v Man Number	Lot
2) TYPE OF WORK New Well Deepening Convers	sion	x Map Number " or 44.59324200 ng o " or -123.059536	DMS or DD
Alteration (complete 2a & 10) X Abandonment(com	plete 5a) La	01 44.39324200	00 DMS or DD
2a) PRE-ALTERATION	Lo	ng or123.059536	DIVIS OF DIV
Dia + From To Gauge Stl Plstc Wld Thrd	[-	110 THREE LAKES RD. SE ALBANY OR.	
Casing:	34	TO THREE LAKES RD. SE ALBANT OR.	9/322
Material From To Amt sacks/lbs			
Seal:	(1	0) STATIC WATER LEVEL	
Rotary Air Rotary Mud Cable Auger Cable Mud	10	Date	SWL(psi) + SWL(ft)
	-,	Existing Well / Pre-Alteration	
Reverse Rotary X Other DR-3300-B		Completed Well	
(4) PROPOSED USE Domestic Irrigation Community		Flowing Artesian?	Dry Hole?
Industrial/ Commercial Livestock Dewatering	W.A	TER BEARING ZONES Depth wa	ter was first found
Thermal Injection X Other DR-3300-B			Flow SWL(psi) + SWL(ft)
		SWE Date 110m 10 Est	Tiow Swiz(psi) . Swiz(it)
(5) BORE HOLE CONSTRUCTION Special Standard (Att	tach copy)		
Depth of Completed Well 0.00 ft.			
BORE HOLE SEAL	sacks/		
Dia From To Material From To Am	it Ibs		
Calculated			
Calculated			
Calculated	(1)	I) WELL LOG Ground Elevation	1
How was seal placed: Method A B C D	E	Material	From To
Other			
Backfill placed from ft. to ft. Material		1 - 12	But the second of
Filter pack from ft. to ft. Material Size			
Explosives used: Yes Type Amount			
(5a) ABANDONMENT USING UNHYDRATED BENTONITI	E _		
Proposed Amount 19.00 Sacks Actual Amount 19.00 Sacks		and the second second	
(6) CASING/LINER			
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc W	ld Thrd		
		A	
	\bot \sqcup \Vdash		
Shoe Inside Outside Other Location of shoe(s)			
Temp casing Yes Dia From + To			
(7) PERFORATIONS/SCREENS			
Perforations Method			
Screens Type Material	_ D	ate Started3/26/2018 Com	pleted 3/26/2018
Perf/ Casing/ Screen Scrn/slot Slot # of	Tele/		
Screen Liner Dia From To width length slots		inbonded) Water Well Constructor Certifi	
		certify that the work I performed on the co	
		onstruction standards. Materials used and in	
		e best of my knowledge and belief.	
			ate 3/29/2018
		19/4	3/29/2018
(8) WELL TESTS: Minimum testing time is 1 hour	s	igned CHARLES NUGENT (E-filed)	
Pump Bailer Air Flowing Arto	esian		
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)) (b	onded) Water Well Constructor Certificat	ion
	I	accept responsibility for the construction, d	eepening, alteration, or abandonmen
	w	ork performed on this well during the constru	ction dates reported above. All wor
	pe	erformed during this time is in compliance	e with Oregon water supply we
Temperature °F Lab analysis Yes By		enstruction standards. This report is true to the	
Water quality concerns? Yes (describe below) TDS amount 0		icense Number 664 Da	ate 3/29/2018
From To Description Amount	Units	ioned over the property of the	
		igned CHARLES NUGENT (E-filed)	14398
	C	ontact Info (optional) Nugent Drilling Co.	- EUVO -

WATER SUPPLY WELL REPORT -

LININN 92 92309

WELL I.D. LABEL# L

		-
1038201		e e

continuation page	
Continuation page	3/2
2a) PRE-ALTERATION	
Dia + From To Gauge Stl Plstc Wld Thrd	
Material From To Amt sacks/lbs	
5) BORE HOLE CONSTRUCTION BORE HOLE SEAL Dia From To Material From To	sacks/ Amt lbs
Calculated Calculated Calculated Calculated Calculated Calculated Calculated	
FILTER PACK From To Material Size	
6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc	Wld Thrd
7) PERFORATIONS/SCREENS	

	Casing/				Scrn/slot	Slot		Tele/
Screen	Liner	Dia	From	То	width	length	slots	pipe siz
								-
								+
					-			-

(8) WELL TESTS: Minimum testing time is 1 hour							
Yield gal/min	Drill stem/Pump depth	Duration (hr)					
	-		-				

			S	START C	ARD#	103	8201		
9/2018				IGINAL I					
Water (Quali	ty Co	ncerr	18					
From	T				ription		Aı	noun	t Units
	+-	-							-
	+						_		
	_								
(10) ST	ATI(C WA	TEF	R LEVEI					
SWL D	ate	Fron	n	То	Est F	low	SWL(p	si)	+ SWL(ft)
								\dashv	
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(11) WE	LLI								
		Mate	erial				From		То
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1 1							I		1

Comments/Remarks

Special Standards were allowed due to inability to get a Drill Rig over the well. Casing was Approx. 5' Below ground level in a pit and casing was Rotten. The 6 inch casing was very thin and flaking on the surface. 3/8 Bentonite was poured and Probed from 100' to 9', and a Cement cap was poured from 5-9' (below ground level)

19 Sack of 3/8 Bentonite was used.

1 Bag of Cement was used for the cap. (94 lb Sack)

14398 -